CALIFORNIA FORM 700		STATEMENT OF ECONOMIC INTERESTS COVER PAGE	
	A F	Public Document	03/27/2024 16:47:53 Filing ID:
ease type or print in ink.			211204824
ME OF FILER (LAST)	(FIRST)	(MIDDLE)
altzman, Rebecca			
Office, Agency, or Court			
Agency Name (Do not use acronyms)			
San Francisco Bay Area Rapid Tr	ansit District		
Division, Board, Department, District, if applied	cable	Your Position	
Board of Directors - BART Board		Board Member	
 If filing for multiple positions, list below or 	on an attachment. (Do not use	e acronyms)	
	·		
Agency: *SEE ATTACHED FOR ADDITI	ONAL POSITIONS	Position:	
Jurisdiction of Office (Check at le	ast one box)		
State		Judge, Retired Judge, Pro Tem Judge (Statewide Jurisdiction)	e, or Court Commissioner
X Multi-County Alameda, Contra Cos	ta, San Francisco	County of	
City of			
		Other	
Type of Statement (Check at least	one box)		
X Annual: The period covered is Januar December 31, 2023.	y 1, 2023 through	Leaving Office: Date Left/_ (Check on	
-or- The period covered is/ December 31, 2023.	, through	 The period covered is January 1, of leaving office. 	, 2023 through the date
Assuming Office: Date assumed	//	 The period covered is/ of leaving office. 	, through the date
Candidate:Date of Election	and office sought, if d	lifferent than Part 1:	
Schedule Summary (required) Schedules attached	► Total number o	of pages including this cover page: _	3
Schedule A-1 - Investments – sche	dule attached	X Schedule C - Income, Loans, & Business	Positions – schedule attached
Schedule A-2 - Investments – sche		Schedule D - Income – Gifts – schedule a	
Schedule B - Real Property – sche	dule attached	Schedule E - Income – Gifts – Travel Pay	ments – schedule attached
r-			
□ None - No reportable interests of	on any schedule		
·	on any schedule		
Verification	-	STATE	ZIP CODE
·	CITY	STATE	ZIP CODE
Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Do	CITY	and CA	ZIP CODE 94604
Verification Mailling address Street	CITY		
Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Do DAYTIME TELEPHONE NUMBER ()	CITY Ocument) Oakla	and CA E-MAIL ADDRESS	94604
Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Do DAYTIME TELEPHONE NUMBER ()	CITY Oakla	ewed this statement and to the best of my knowle	94604

122100409-NFH-0409

Date Signed	Signature _ Rebecca Saltzman
(month, day, year)	(File the originally signed paper statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS COVER PAGE Expanded Statement Attachment

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FAIR POLITICAL PRACTICES COMMISSION

Name Rebecca Saltzman

* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #
Capitol Corridor JPA	Capitol Corridor JPA - Board of Directors	Member, Capitol Corridor Joint Powers	Annual 1/1/2023 - 12/31/2023	032200433-NFH-0433
San Francisco Bay Area Rapid Transit District	Board of Directors - BART Board	Board Member	Annual 1/1/2023 - 12/31/2023	122100409-NFH-0409

122100409-NFH-0409

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

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FAIR POLITICAL PRACTICES COMMISSION

Name

Saltzman, Rebecca

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED			
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME			
Bike East Bay	Coalition of Kaiser Permanent Unions			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
Oakland, CA 94607	Oakland, CA 94612			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Non-Profit				
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION			
Development Director	Executive Assistant/Project Manager			
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position On			
\$500 - \$1,000 \$1,001 - \$10,000	□ \$500 - \$1,000 □ \$1,001 - \$10,000			
X \$10,001 - \$100,000 OVER \$100,000	X \$10,001 - \$100,000 OVER \$100,000			
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED			
X Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary X Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)			
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)			
Sale of	Sale of			
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)			
Loan repayment	Loan repayment			
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more			
(Describe)	(Describe)			
Other	Other			
(Describe)	(Describe)			

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	INTEREST RATE		TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%	None None	
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN		
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property _		Street address
□ \$500 - \$1,000 □ \$1,001 - \$10,000	City		
<pre>\$10,001 - \$100,000</pre> OVER \$100,000	Other		
	—		(Describe)

Comments: _